

CLAIMS ONLY							Application Number <i>10/049816Q</i>	Filing Date		
							Applicant(s)			
							* May be used for additional claims or amendments			
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT					
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend		
1	/					51				
2	/					52				
3	/					53				
4						54				
5	/					55				
6	/					56				
7						57				
8	/					58				
9						59				
10	/					60				
11	/					61				
12	2					62				
13	/					63				
14	/					64				
15						65				
16	/					66				
17	/					67				
18						68				
19	8					69				
20						70				
21						71				
22						72				
23						73				
24						74				
25						75				
26						76				
27						77				
28						78				
29						79				
30						80				
31						81				
32						82				
33						83				
34						84				
35						85				
36						86				
37						87				
38						88				
39						89				
40						90				
41						91				
42						92				
43						93				
44						94				
45						95				
46						96				
47						97				
48						98				
49						99				
50						100				
Total Indep	/									
Total Depend	80									
Total Claims	31									